


PAPERWORK REDUCTION ACT

CHANGE WORKSHEET

Agency/Subagency Department of Education – FSA – Federal Student Aid		OMB Control Number 1845-0045 v. 42
Enter only items that change <div style="display: flex; justify-content: space-around; font-weight: bold; font-size: small;"> Current Record New Record </div>		
Agency form number(s)	NA	NA
Annual reporting and record keeping hour burden Number of respondents Total annual responses Percent of these responses collected electronically Total annual hours Difference Explanation of difference Program Change Adjustment	<div style="background-color: #cccccc; height: 15px; margin-bottom: 2px;"></div> 5,000 5,000 100% 417 <div style="background-color: #cccccc; height: 100px; margin-top: 10px;"></div>	<div style="background-color: #cccccc; height: 15px; margin-bottom: 2px;"></div> 12,000 12,000 100% 417 NA NA NA
Annual reporting and record keeping cost burden (in thousands of dollars) Total annualized capital/startup costs Total annual costs (O&M) Total annualized cost requested Difference Explanation of difference Program Change Adjustment	<div style="background-color: #cccccc; height: 15px; margin-bottom: 2px;"></div> NA NA NA <div style="background-color: #cccccc; height: 100px; margin-top: 10px;"></div>	<div style="background-color: #cccccc; height: 15px; margin-bottom: 2px;"></div> NA NA NA NA NA NA
Other change** The survey is updated to add additional choices for the respondents based on feedback of the survey previously approved. This collection does not increase the burden on the general public, as prior OMB approval has been received under the master plan for customer satisfaction surveys. This survey falls under the master plan guidelines.		
Signature of Senior Officer or designee: 	Date: October 23, 2008 10-29-08	For OIRA Use <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>

****This form cannot be used to extend an expiration date**

OMB 83-C